

LIBRARY CARD APPLICATION FOR A CHILD UNDER 16

Child's Last Name: _____ Child's Birthdate: _____

Child's First Name: _____ Middle Name: _____

Parent's Name: _____

Parent's Birthdate: _____ Driver's License (or TX ID): _____

Mailing Address: _____ Apt: _____

City: _____ State: _____ Zip: _____ Telephone: _____

County of Residence: _____ School District: _____

Provide additional address, if you use a PO box, reside at a different address from your mailing address, are a student with a permanent home address, or own Hays County property at a different address:

I agree to supervise my child's use of the library and to accept responsibility for all materials borrowed on this library card. If my address changes or if this card gets lost or stolen, I will notify the library immediately.

Parent's Signature: _____ Date: _____

FOR LIBRARY STAFF USE ONLY:

- _____ **CITY LIMITS** (in City Limits of San Marcos)
- _____ **HAYS** (in Hays County, NOT city limits)
- _____ **JSMCISD** (not in Hays County, but child lives in SM school district boundaries)
- _____ **LIMITED** (not in Hays County, PAY \$5.00 per quarter)
- _____ **NONRESTEMP** (not in Hays County, PAY \$15 per quarter)
- _____ **NONRESYEAR** (not in Hays County, PAY \$40 per year)
- _____ **UNKNOWN** (unsure of residency status)

Staff Initials

Card FEE Paid \$ _____

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